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OFFICIAL

Date March 2, 2004
To Examiner Duc Q. Dinh
From James L. Wolfe
Re Serial no. 09/966,610; Our File: US018149
Tel n/a
Fax (703) 872-9314
Pages 12 + cover sheet

Dear Examiner Dinh:

Enclosed for filing in connection with the above-referenced application are the following documents:

- Transmittal;
- Fee Transmittal; and
- Amendment and Response to Office Action Dated December 30, 2003.

Sincerely,

James L. Wolfe

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PTO/SB/21 (08-09)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/966,610	
	Filing Date	September 27, 2001	
	First Named Inventor	Gregory Robert Roelofs	
	Art Unit	2674	
	Examiner Name	Duc Q. Dinh	
Total Number of Pages in This Submission	12	Attorney Docket Number	US018149

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks _____		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	James L. Wolfe	
Signature	<i>James L. Wolfe</i>	
Date	March 2, 2004	

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Typed or printed name	Shannon Verboort	
Signature	<i>Shannon Verboort</i>	Date March 2, 2004

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